Oklahoma State Bureau of Investigation
Criminalistics Services Division
Laboratory Kit and Supply Request Form

Contact Information

Requestor's Name: _____

Requesting Agency: _____

Street Address: _____

City: _____ Zip Code: _____

Telephone Number: _____ Date of Request: _____

Email: _____

Available Evidence Collection Kits and Supplies

☐	Sexual Assault	Qty: _____	☐	Evidence Envelopes	Qty: _____
☐	Gunshot Residue	Qty: _____	☐	Arson Cans*	Qty: _____
☐	Blood Alcohol/Blood Drug	Qty: _____	☐	Buckets (Clan Lab)*	Qty: _____
☐	Marihuana Field Test	Qty: _____	☐	Nalgene Bottles (Clan Lab)*	Qty: _____
☐	Drug Facilitated Sexual Assault	Qty: _____	☐	Pipettes (Clan Lab)*	Qty: _____

*Note: These items are not available for shipping and must be picked up by the requesting agency.

For OSBI Use Only

To Be Shipped ☐ Picked up in Person ☐

Number of Kits Released:		Number of Supplies Released:	
SAK	_____	**EE**	_____
GSR	_____	**Arson Cans**	_____
BA/BD	_____	**Buckets**	_____
MFTK	_____	**Nalgene Bottles**	_____
DFSA	_____	**Pipettes**	_____

Date Kits were Shipped or Picked up: _____

Released by: _____

Please fax this sheet to the Forensic Science Center at: (405) 330-4732

Or

Email the form to Linda Cain at Linda.Cain@osbi.ok.gov or Julie Garrett at Julie.Garrett@osbi.ok.gov